EXHIBIT 2: CLAIM NO. 2889

B10 (Official Form 10) (04/13) (Modified)		· · · · · · · · · · · · · · · · · · ·
UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT of MICHIGAN		CI PLE 9 PROCEOL CAL
Name of Debtor: City of Detroit, Michigan	Case Number: 13-53846	
NOTE: Do not use this form to make a claim for an administrative expense that arises after the bankruptcy filing.		FEB 2 1 2014
Name of Creditor (the person or other entity to whom the debtor owes money or produced by the second of the second	roperty):	COURT BRICKINDICY COURT
Name and address where notices should be sent:		Check this box take plain amends a
LAVAN WOODBERRY		previously filed claim.
803 GLADSTONE		Court Claim Number:
DET MI 48202		
Telephone number: 313575 9714 email: Tod 5C504712 ey Mail. CoM Name and address where payment should be sent (if different from above):		Filed on: Check this box if you are aware that
payanta and the payanta and th		anyone else has filed a proof of claim
		relating to this claim. Attach copy of statement giving a statement gi
Telephone number: email:		BUTCHATE
1 00		FEB 2 4 2014
- /		7
If all or part of the claim is secured, complete item 4. If all or part of the claim is entitled to priority, complete item 5.		KUR TZMAN CARSON CONSULTANTS
Check this box if the claim includes interest or other charges in addition to the p		statement that itemizes interest or charges.
2. Basis for Claim: City Took Property Without fixing Just Compensations (See instruction #2)		
3. Last four digits of any number by which creditor identifies debtor: 3	Sa. Debtor may have scheduled accou	int as: NA
N4	(See instruction #3a)	
4. Secured Claim (See instruction #4) Check the appropriate box if the claim is secured by a lien on property or a right of included in secured claim, if any:		
setoff, attach required redacted documents, and provide the requested information.		
Nature of property or right of setoff: Real Estate Motor Vehicle Other Basis for perfection: Eminent Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai Osmai		
Value of Property: \$ 1,000,000,00	Amount of Secured Claim:	\$1,000,000.00
Annual Interest Rate (when case was filed) % Fixed or Variable Amount Unsecured: \$		
5. Amount of Claim Entitled to Priority as an Administrative Expense under 11 U.S.C. §§ 503(b)(9) and 507(a)(2).		
5b. Amount of Claim Otherwise Entitled to Priority. Specify Applicable Section of 11 U.S.C. § US CONST 5th AM \$ 1,000,000,000		
6. Credits. The amount of all payments on this claim has been credited for the purpose of making this proof of claim. (See instruction #6)		
7. Documents: Attached are redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, security agreements, or, in the case of a claim based on an open-end or revolving consumer credit agreement, a		
statement providing the information required by FRBP 3001(c)(3)(A). If the claim is secured, box 4 has been completed, and redacted copies of documents providing		
evidence of perfection of a security interest are attached. (See instruction #7, and the definition of "redacted".) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.		
If the documents are not available, please explain:		
8. Signature: (See instruction # 8) Check the appropriate box.		
☐ I am the creditor. ☐ I am the creditor, ☐ I am a guarantor, surety, indorser, or other codebtor.		
or their authorized agent. (See Bankruptcy Rule 3005.) (See Bankruptcy Rule 3004.)		
I declare under penalty of perjury that the information provided in this claim is true and correct to the best of my knowledge, information, and reasonable belief. Print Name: Crancian Ward Sealth		
Title: Au Thorres Agent	() Hill	2-21-14
111	(Signature)	2-21-14 (Date)
Telephone number: email:		